

**Fill in this information to identify the case:**

Debtor name GeneralHealth Group, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) 24-11860 (JLG)

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

☐ None.

**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year**

**For prior year:**  
From **1/01/2023** to **12/31/2023**

**Sources of revenue**  
Check all that apply

☒ Operating a business

☐ Other \_\_\_\_\_

**Gross revenue**  
(before deductions and exclusions)

**\$3,475,049.00**

**For year before that:**  
From **1/01/2022** to **12/31/2022**

☒ Operating a business

☐ Other \_\_\_\_\_

**\$1,133,340.00**

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

**Creditor's Name and Address**

**Dates**

**Total amount of value**

**Reasons for payment or transfer**  
*Check all that apply*

Debtor **GeneralHealth Group, Inc.**Case number (if known) **24-11860 (JLG)****4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. GeneralHealth Group of Illinois, LLC 222 N. Plum Grove Rd. Palatine, IL 60067 Subsidiary	11/3/23 10/30/2023 11/3/2023 11/11/23 11/13/23 11/13/23 11/17/23 11/17/2023 11/21/2023 11/27/23 12/1/23 12/1/2023 12/14/23 12/18/2023 12/20/23 12/20/23 12/28/23 12/29/2023 12/30/2023 12/31/2023 1/18/24 8/5/24	\$46,559.59	Intercompany transfer (cash flow)
4.2. GeneralHealth Group of Ohio LLC 1400 East David Road Dayton, OH 45429 Subsidiary	12/10/2023 1/21/2024 3/11/2024 5/13/2024 11/10/2024	\$4,008.34	Intercompany transfer (cash flow)
4.3. Ruth Berenstein 432 Suydam Street Brooklyn, NY 11237 Managing director	12/12/2023 12/27/2023 1/3/2024 1/11/2024	\$2,358.94	Reimbursements

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

**Part 3: Legal Actions or Assignments**

Debtor **GeneralHealth Group, Inc.**

Case number (if known) **24-11860 (JLG)**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	<b>Aylward et al. v. GeneralHealth Group, Inc. et al. 2023-CH-04986</b>	<b>Injunctive relief</b>	<b>Illinois Circuit Court, Cook County 50 W. Washington St. Chicago, IL 60602</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.2.	<b>Magid v. GeneralHealth Group, Inc. et al. CL24000386-00</b>	<b>Contract</b>	<b>24th Judicial Circuit of Virginia Civil Court 900 Court Street Lynchburg, VA 24504</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	<b>Michel Neret, MD v. GeneralHealth Group, Inc., et al. 123111-CV</b>	<b>Injunctive relief &amp; breach of contract</b>	<b>Texas District Court, Brazoria County Brazoria County Courthouse 111 E. Locust St. Angleton, TX 77515</b>	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	<b>GeneralHealth Group, Inc. et al v. Michel Neret, MD 01-24-00184-CV</b>	<b>Appeal of default judgment</b>	<b>Texas Court of Appeals, First District 301 Fannin Street Houston, TX 77002-2066</b>	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.5.	<b>GeneralHealth Group, Inc. et al v. Paul Hammer, Esq. et al. 202417311</b>	<b>Legal Malpractice</b>	<b>Texas District Court, Harris County Harris County Courthouse 201 Caroline, 11th Floor Houston, TX 77002</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions**

**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

**Part 5: Certain Losses**

**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Debtor **GeneralHealth Group, Inc.**

Case number (if known) **24-11860 (JLG)**

**Description of the property lost and how the loss occurred**

**Amount of payments received for the loss**

**Dates of loss**

**Value of property lost**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

**Part 6: Certain Payments or Transfers**

**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

**Who was paid or who received the transfer?**  
**Address**

**If not money, describe any property transferred**

**Dates**

**Total amount or value**

11.1. **Porzio, Bromberg & Newman, P.C.**  
**1675 Broadway, Suite 1810**  
**New York, NY 10019**

**Attorney Fees**

**10/18/24**

**\$7,500.00**

**Email or website address**  
**pgyparakis@pbnlaw.com**

**Who made the payment, if not debtor?**

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

☒ None.

**Name of trust or device**

**Describe any property transferred**

**Dates transfers were made**

**Total amount or value**

**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

**Who received transfer?**  
**Address**

**Description of property transferred or payments received or debts paid in exchange**

**Date transfer was made**

**Total amount or value**

**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

**Address**

**Dates of occupancy**  
**From-To**

**Part 8: Health Care Bankruptcies**

**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

Debtor **GeneralHealth Group, Inc.**

Case number (if known) **24-11860 (JLG)**

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

**Part 9: Personally Identifiable Information**

**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address

Names of anyone with access to it  
Address

Description of the contents

Does debtor still have it?

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☒ None

Facility name and address

Names of anyone with access to it

Description of the contents

Does debtor still have it?

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

Debtor **GeneralHealth Group, Inc.**Case number (if known) **24-11860 (JLG)****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
-----------------------	-------------------------------------	--

Dates business existed
------------------------

25.1. **GeneralHealth Group of  
Illinois, LLC  
222 N. Plum Grove Rd.  
Palatine, IL 60067**

**Healthcare management**

**EIN: 92-3995686**

**From-To 1/19/2022 - Present**

Debtor **GeneralHealth Group, Inc.**

Case number (if known) **24-11860 (JLG)**

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed
25.2. <b>GeneralHealth Group of Colorado, LLC</b> <b>1801 Broadway, Suite 1225</b> <b>Clarksboro, NJ 08020</b>	<b>Healthcare management</b>	EIN: <b>932791592</b>  From-To <b>8/8/2023 - Present</b>
25.3. <b>GeneralHealth Group of Pennsylvania LLC</b> <b>1 Northgate Square, Ste 100</b> <b>Greensburg, PA 15601</b>	<b>Healthcare management</b>	EIN: <b>93-2675353</b>  From-To <b>7/25/2023 - Present</b>
25.4. <b>GeneralHealth Group of SouthCarolina LLC</b> <b>124 Glenwood Drive</b> <b>Rock Hill, SC 29732</b>	<b>Healthcare management</b>	EIN: <b>92-1427481</b>  From-To <b>12/20/2022 - Present</b>
25.5. <b>GeneralHealth Group of Utah LLC</b> <b>150 S 1000 E</b> <b>Salt Lake City, UT 84102</b>	<b>Healthcare management</b>	EIN: <b>87-4684277</b>  From-To <b>1/27/2022 - 6/01/2023</b>
25.6. <b>GeneralHealth Group of Virginia LLC</b> <b>1612 Graves Mill Road</b> <b>Lynchburg, VA 24502</b>	<b>Healthcare management</b>	EIN: <b>93-2497540</b>  From-To <b>07/21/2023 - Present</b>
25.7. <b>GeneralHealth Group of Texas LLC</b> <b>1106 S WS Young Dr</b> <b>Killeen, TX 76543</b>	<b>Healthcare management</b>	EIN: <b>92-3417940</b>  From-To <b>3/23/2023 - 5/28/2024</b>
25.8. <b>GeneralHealth Group of Ohio LLC</b> <b>1400 East David Road</b> <b>Dayton, OH 45429</b>	<b>Healthcare management</b>	EIN: <b>88-4261336</b>  From-To <b>1/03/2022 - 7/19/2023</b>

26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. <b>Armanino, LLP</b> <b>2700 Camino Ramon #350</b> <b>San Ramon, CA 94583</b>	<b>2023-Present</b>
26a.2. <b>Haynie &amp; Company</b> <b>1785 WEST 2300 SOUTH</b> <b>Salt Lake City, UT 84119</b>	<b>2022-2023</b>
26a.3. <b>Meru Accounting</b> <b>2803 Philadelphia Pike B</b> <b>Claymont, DE 19703</b>	<b>2021-2022</b>

Debtor **GeneralHealth Group, Inc.**

Case number (if known) **24-11860 (JLG)**

Name and address	Date of service From-To
26a.4. <b>Sobel &amp; Co., LLC</b> <b>293 Eisenhower Parkway, 2nd Fl.</b> <b>Livingston, NJ 07039</b>	<b>2021-2022</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. <b>Hipolito Ponce</b> <b>Avenida Adolfo López Mateos, M-41, L-15</b> <b>Colonia Adolfo López Mateos</b> <b>Mexico City, MX 15670</b>

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>Ruth Berenstein</b>	<b>432 Suydam Street</b> <b>Brooklyn, NY 11237</b>	<b>Managing director &amp; sole shareholder</b>	<b>100%</b>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Pete Clarkson</b>	<b>8359 Sherman Circle</b> <b>Brooksville, FL 34613</b>	<b>Shareholder</b>	<b>2/09/2020 - 3/11/2024</b>



Debtor **GeneralHealth Group, Inc.**

Case number (if known) **24-11860 (JLG)**

Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Pedro Hernandez Guerrero</b>	<b>Mariano Escoledo 553 Mexico City, MX 11586</b>	<b>Shareholder</b>	<b>12/24/2020 - 05/22/202</b>
Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Sally Jeffcoat</b>	<b>7460 N Catalina Ridge Drive Tucson, AZ 85718</b>	<b>Shareholder</b>	<b>12/10/2020 - 03/13/2024</b>
Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Marek Nosek</b>	<b>Minská 774/6 101 00 Praha 10-Vršovice, Czechia</b>	<b>Shareholder</b>	<b>12/28/2020 - 12/01/2023</b>
Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Ken Czarnecki</b>	<b>7803 Purdue St. Dallas, TX 75225</b>	<b>Shareholder</b>	<b>2/23/2022 - 03/11/2024</b>
Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Diane Nobles</b>	<b>4 Mills Road #93 Newcastle, ME 04553</b>	<b>Shareholder</b>	<b>02/23/2022 - 10/01/2024</b>
Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Robert Blyskal</b>	<b>1511 Selena Drive Myrtle Beach, SC 29579</b>	<b>Shareholder</b>	<b>01/22/2024 - 09/04/2024</b>
Name	Address	Position and nature of any interest	Period during which position or interest was held
<b>Michael Stein</b>	<b>3000 Sunny Hill Lane Prosper, TX 75078</b>	<b>Shareholder</b>	<b>07/17/2023 - 07/20/2024</b>

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☒ No  
☐ Yes. Identify below.

Debtor GeneralHealth Group, Inc.

Case number (if known) 24-11860 (JLG)

Name of the pension fund

Employer Identification number of the pension fund

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 31, 2024

/s/ Ruth Berenstein

Signature of individual signing on behalf of the debtor

Ruth Berenstein

Printed name

Position or relationship to debtor Managing Director

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes